Minor Release of Liability and Waiver of Rights



Teen Missions International, Inc. 885 E. Hall Road. Merritt island. FL 32953 Tel: (321)453-0350 Fax: (321)452-7988 teenmissions.org

THE UNDERSIGNED, AS PAREN	T(S) AND/OR LEGAL	GUARDIAN(S) OF
THE UNDERSIONED, AS I AILE		

(Insert Full Legal Name)	, DATE OF BIRTH	(" MINOR ") Child-1
(Insert Full Legal Name)	, DATE OF BIRTH	_(" MINOR ") Child-2
(Insert Full Legal Name)	, DATE OF BIRTH	_(" MINOR ") Child-3
(Insert Full Legal Name)	, DATE OF BIRTH	("MINOR") Child-4
BY SIGNING THIS DOCUMENT I/WE HEREBY WAIVE CERTAIN LEGAINTERNATIONAL, INC., A FLORIDA NOT FOR PROFIT CORPORATION.	AL RIGHTS, INCLUDING THE RIGHT TO	O SUE TEEN MISSIONS
ACTIVITY:	DATE OF ACTIVIT	Y:
(Including any transportation provided to and from the Activity)		
<u>COVENANTS AND AGREEMENTS</u> . I/We, on behalf of myself/ourselves and myself/ourselves, my/our personal representatives, my/our heirs, next-of-kin, insured		onally agree for the Minor,

- ASSUMPTION OF RISK. It is my/our choice to allow the Minor to participate in the Activity named above and such decision is knowing, voluntary, and made for the Minor's personal enjoyment. I/We understand that the Minor's participation in the Activity involves inherent risks and dangers of accidents, rescue operations, emergency treatment, property loss or damage, serious personal and bodily injury, death, and severe personal and economic losses. These may result not only from the Minor's own actions, inactions, or negligence, but also from the actions, inactions, or negligence of others, or the condition of the facilities, equipment or vehicles. Further, I/we acknowledge there may be other risks not known to me/us or the Minor are reasonably foreseeable at this time. THIS MEANS I/WE UNDERSTAND AND I/WE HAVE CONSIDERED THE RISKS INVOLVED, AND I/WE VOLUNTÁRILY AND FREELY CHOOSE TO ASSUME THESE RISKS ON BEHALF OF MYSELF/OURSELVES AND THE MINOR.
- RELEASE FROM LIABILITY. I/We, on behalf of myself/ourselves and the Minor, fully and forever release and discharge Teen Missions International, Inc. and its respective affiliates, directors, officers, employees, volunteers, agents, and insurers (collectively referred to in this Release and Waiver as "Teen Missions") from any and all injuries (including death), losses, damages, claims (including negligence claims), demands, lawsuits, expenses, and any other liability of any kind, of or to the Minor, me/us, our property, or any other person, directly or indirectly arising out of or in connection with the Minor's participation in the Activity. THIS MEANS I AM/WE ARE MAKING THIS RELEASE FROM LIABILITY EVEN IF ANY CLAIMS THE MINOR OR I/WE MAY HAVE ARE A RESULT OF THE NEGLIGENCE, INJUDICIOUS ACT, OMISSION OR OTHER FAULT OF TEEN MISSIONS. NOTWITHSTANDING THE FOREGOING, THIS WAIVER DOES NOT RELEASE TEEN MISSIONS FROM GROSS NEGLIGENCE OR WILLFUL MISCONDUCT.
- 3. INDEMNITY. I/We, on behalf of myself/ourselves and the Minor, will defend, indemnify, hold harmless and reimburse Teen Missions from and for all damages, losses, costs, or expenses (including legal fees) incurred by Teen Missions or paid by them to any person (including me/us or my/our insurers) in respect of any accident, injury (including death), loss, or property damage, however caused resulting from, arising out of, or otherwise in connection with the Minor's participation in the Activity. THIS MEANS I/WE WILL REIMBURSE TEEN MISSIONS IF ANYONE MAKES A CLAIM AGAINST TEEN MISSION IN CONNECTION WITH THE MINOR'S PARTICIPATION IN THE ACTIVITY.
- 4. COVENANT NOT TO SUE. I/We, on behalf of myself/ourselves and the Minor, will not initiate any claim, lawsuit, court action or other legal proceeding or demand against TEEN MISSIONS, nor join or assist in the prosecution of any claim for money or other damages which anyone may have, on account of injuries (including death), losses, or damages sustained by me/us, other parties or my/our (or others') property in connection with the Minor's participation in the Activity, and I/we waive any right I/we or the Minor may have to do so. THIS MEANS THAT I/WE OR THE MINOR CANNOT SUE TO HOLD THE TEEN MISSIONS RESPONSIBLE FOR ANY INJURY, LOSS, OR DAMAGE SUSTAINED BY THE MINOR, ME/US, OTHER PARTIES OR OUR (OR OTHERS') PROPERTY IN CONNECTION WITH THE ACTIVITY, EVEN IF IT IS DUE TO THE NEGLIGENCE, INJUDICIOUS ACT, OMISSION OR OTHER FAULT OF TEEN MISSIONS. I/We, on behalf of myself/ourselves and the Minor, waive my/our insurers' right to make a claim against Teen Missions based on payments by insurers to the Minor, me/us or on our behalf for any reason. THIS MEANS MY/OUR INSURERS HAVE NO RIGHTS OF SUBROGATION AGAINST TEEN MISSIONS.

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Signature (Parent or Legal Guardian)	Date	Signature (Parent or Legal Guardian)	Date
INFORMATION THAT WOULD INFLUENCE INCLUDING, WITHOUT LIMITATION, ANY TR	THE DECISION OR RANSPORTATION	STATEMENTS AND I/WE DECLARE THAT DETEEN MISSIONS IN ALLOWING THE MINOR I PROVIDED BY ME, TEEN MISSIONS OR OTHER	TO PARTICIPATE IN THE ACTIVITY, PARTIES.
HEREIN, FULLY UNDERSTAND ALL THE AM/ARE VOLUNTARILY GIVING UP SUBS	TERMS, UNDE TANTIAL LEGAL AINED HEREIN,	VER OF RIGHTS, INCLUDING THE COVENANT RSTAND THAT I/WE, ON BEHALF OF MYSE RIGHTS BY SIGNING BELOW, AND HAVE SIGN FREELY AND VOLUNTARILY AND WITHOU	LF/OURSELVES AND THE MINOR, ED THIS RELEASE, INCLUDING THE
6. PUBLICITY. I/We, on behalf of myself/o and likeness in connection with the Activity for		Minor, hereby grant Teen Missions, without limitation ut further compensation or permission.	on, the right to use the Minor's name
Group/Policy #:		Member #:	
Medical Insurance Company:			
Family Physician:		Phone:	
	· · · · · · · · · · · · · · · · · · ·	Phone:	

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5. MEDICAL EXPENSES. I/We, on behalf of myself/ourselves and the Minor, hereby consent to the Minor's receipt of medical treatment which may

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Print Name

THE UNDERSIGNED, AS PARENT(S) AND/OR LEGAL GUARDIAN(S) OF

(Insert Full Legal Name)	, DATE OF BIRTH	(" MINOR ") Child-1
(Insert Full Legal Name)	, DATE OF BIRTH	(" MINOR ") Child-2
(Insert Full Legal Name)	, DATE OF BIRTH	(" MINOR ") Child-3
(Insert Full Legal Name)	, DATE OF BIRTH	(" MINOR ") Child-4
BY SIGNING THIS DOCUMENT I/WE HEREBY WAIVE CERTAIN LEINTERNATIONAL, INC., A FLORIDA NOT FOR PROFIT CORPORATION.	EGAL RIGHTS, INCLUDING THE RIGHT	TO SUE TEEN MISSION
ACTIVITY:	DATE OF ACTIV	VITY:
(Including any transportation provided to and from the Activity)		

COVENANTS AND AGREEMENTS. I/We, on behalf of myself/ourselves and the Minor, hereby irrevocably and unconditionally agree for the Minor, myself/ourselves, my/our personal representatives, my/our heirs, next-of-kin, insurers, successors and assigns, as follows:

- 1. **ASSUMPTION OF RISK.** It is my/our choice to allow the Minor to participate in the Activity named above and such decision is knowing, voluntary, and made for the Minor's personal enjoyment. I/We understand that the Minor's participation in the Activity involves inherent risks and dangers of accidents, rescue operations, emergency treatment, property loss or damage, serious personal and bodily injury, death, and severe personal and economic losses. These may result not only from the Minor's own actions, inactions, or negligence, but also from the actions, inactions, or negligence of others, or the condition of the facilities, equipment or vehicles. Further, I/we acknowledge there may be other risks not known to me/us or the Minor are reasonably foreseeable at this time. THIS MEANS I/WE UNDERSTAND AND I/WE HAVE CONSIDERED THE RISKS INVOLVED, AND I/WE VOLUNTARILY AND FREELY CHOOSE TO ASSUME THESE RISKS ON BEHALF OF MYSELF/OURSELVES AND THE MINOR.
- 2. RELEASE FROM LIABILITY. I/We, on behalf of myself/ourselves and the Minor, fully and forever release and discharge Teen Missions International, Inc. and its respective affiliates, directors, officers, employees, volunteers, agents, and insurers (collectively referred to in this Release and Waiver as "Teen Missions") from any and all injuries (including death), losses, damages, claims (including negligence claims), demands, lawsuits, expenses, and any other liability of any kind, of or to the Minor, me/us, our property, or any other person, directly or indirectly arising out of or in connection with the Minor's participation in the Activity. THIS MEANS I AM/WE ARE MAKING THIS RELEASE FROM LIABILITY EVEN IF ANY CLAIMS THE MINOR OR I/WE MAY HAVE ARE A RESULT OF THE NEGLIGENCE, INJUDICIOUS ACT, OMISSION OR OTHER FAULT OF TEEN MISSIONS. NOTWITHSTANDING THE FOREGOING, THIS WAIVER DOES NOT RELEASE TEEN MISSIONS FROM GROSS NEGLIGENCE OR WILLFUL MISCONDUCT.
- 3. **INDEMNITY.** I/We, on behalf of myself/ourselves and the Minor, will defend, indemnify, hold harmless and reimburse Teen Missions from and for all damages, losses, costs, or expenses (including legal fees) incurred by Teen Missions or paid by them to any person (including me/us or my/our insurers) in respect of any accident, injury (including death), loss, or property damage, however caused resulting from, arising out of, or otherwise in connection with the Minor's participation in the Activity. **THIS MEANS I/WE WILL REIMBURSE TEEN MISSIONS IF ANYONE MAKES A CLAIM AGAINST TEEN MISSION IN CONNECTION WITH THE MINOR'S PARTICIPATION IN THE ACTIVITY.**
- 4. COVENANT NOT TO SUE. I/We, on behalf of myself/ourselves and the Minor, will not initiate any claim, lawsuit, court action or other legal proceeding or demand against TEEN MISSIONS, nor join or assist in the prosecution of any claim for money or other damages which anyone may have, on account of injuries (including death), losses, or damages sustained by me/us, other parties or my/our (or others') property in connection with the Minor's participation in the Activity, and I/we waive any right I/we or the Minor may have to do so. THIS MEANS THAT I/WE OR THE MINOR CANNOT SUE TO HOLD THE TEEN MISSIONS RESPONSIBLE FOR ANY INJURY, LOSS, OR DAMAGE SUSTAINED BY THE MINOR, ME/US, OTHER PARTIES OR OUR (OR OTHERS') PROPERTY IN CONNECTION WITH THE ACTIVITY, EVEN IF IT IS DUE TO THE NEGLIGENCE, INJUDICIOUS ACT, OMISSION OR OTHER FAULT OF TEEN MISSIONS. I/We, on behalf of myself/ourselves and the Minor, waive my/our insurers' right to make a claim against Teen Missions based on payments by insurers to the Minor, me/us or on our behalf for any reason. THIS MEANS MY/OUR INSURERS HAVE NO RIGHTS OF SUBROGATION AGAINST TEEN MISSIONS.

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Family Physician:	Phone:
Medical Insurance Company:	-
Group/Policy #:	Member #:
and likeness in connection with the Activity for any publicity without further comper	nsation or permission.
I/WE HAVE READ THIS RELEASE OF LIABILITY AND WAIVER OF RIGHT HEREIN, FULLY UNDERSTAND ALL THE TERMS, UNDERSTAND THAT AM/ARE VOLUNTARILY GIVING UP SUBSTANTIAL LEGAL RIGHTS BY SIG COVENANTS AND AGREEMENTS CONTAINED HEREIN, FREELY AND GUARANTEE OF ANY NATURE BEING MADE TO ME/US. I/WE HEREBY WARRANT THE TRUTH OF THE ABOVE STATEMENTS INFORMATION THAT WOULD INFLUENCE THE DECISION OF TEEN MISSIGNICLUDING, WITHOUT LIMITATION, ANY TRANSPORTATION PROVIDED BY	INING BELOW, AND HAVE SIGNED THIS RELEASE, INCLUDING THE VOLUNTARILY AND WITHOUT INDUCEMENT, ASSURANCE OF AND I/WE DECLARE THAT I/WE HAVE NOT WITHHELD AND ONS IN ALLOWING THE MINOR TO PARTICIPATE IN THE ACTIVITY

Print Name

5 MEDICAL EXPENSES I/We on helpalf of myself/ourselves and the Minor, hereby consent to the Minor's receipt of medical treatment which may

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Phone

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